

POSITION		ID NO.	DATE
CLASSIFIER		20	5-17-02
EXAMINER			5-17-02
TYPIST	337	20	5-17-02
VERIFIER		291	5-20-02
CORPS CORR.			5-20-02
SPEC. HAND			
FILE MAINT.			
DRAFTING			

# INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	5/17/02
2	5/17/02
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through number) Canceled
- Restricted
- Non-elected
- Interference
- Appeal
- Objected

Claim	Date
Final	
Original	
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